

REA Date Stamp

Project

Title: _____

APPENDIX 3: RADIATION SAFETY COMMITTEE INFORMATION

Protocol number: _____

Principal Investigator for protocol: _____

Principal Investigator listed on REA: _____

Radionuclide Experimental Authorization (REA) number: _____

List all other persons who will work with radioactive materials or radiation producing machines under this protocol:

Provide the following for each radioisotope & chemical form:

Radioisotope(s)	Chemical form	Maximum activity per experiment	Maximum activity ordered at one time	Number of experiments per month	Maximum act. possessed at one time

Will animals be injected with radioactive material?

☐ Yes

☐ No

IF YES:

Type of animal	Weight (gm)	Isotope & Activity administered	Number of animals	Route of administration

Will the activity concentrate in one specific organ or location in the animal? ☐ Yes ☐ No

What organ or where? _____

Will excision of that organ or location possibly reduce the activity in the remainder of the animal to $<0.005 \mu\text{Ci/gm}$ of tissue? ☐ Yes ☐ No

Please provide as accurate an estimate as possible of the amounts of radioactive waste, e.g. bags/month, this protocol will generate. Draw on your or other researchers' experience with the procedures you are proposing to use.

Radioactive procedure	Activity used	Physical Form	Half-life	Approximate amount of waste	Number of years for project

Note: Physical form means liquid, solid, or animal carcasses. Half-life is the half-life of the longest isotope whether the radioactive material is short (<120 days) or long (>120 days) half-lived materials. Short-lived materials can be held on site for decay to background in most cases.

For amount of material being generated indicate approximate amount per month or quarter if the material will be used steadily throughout the project or if only generated once or twice a year indicate annual amount.

Have you considered using a non-radioactive alternative to the procedures or assays specified in this submission? ☐ Yes ☐ No

I understand that before the USUHS Radiation Safety Committee (RSC) will approve this project, I must have or be listed on a Radionuclide Experimental Authorization (REA) that approves the above-listed procedures, radioisotopes and quantities. REAs are obtained or amended through the USUHS Center for Environmental Health and Occupational Safety.

Principle Investigator list on REA (signature)

Date